SUNNY HILL HEALTH CARE CENTER

4325 NAKOMA RD

| MADISON 53711 Phone: (608) 271-7321 | | Ownership: | Limited Liability Company |
|---|-----|-----------------------------------|---------------------------|
| Operated from 1/1 To 12/31 Days of Operation: | 366 | Highest Level License: | Skilled |
| Operate in Conjunction with Hospital? | No | Operate in Conjunction with CBRF? | No |
| Number of Beds Set Up and Staffed (12/31/04): | 63 | Title 18 (Medicare) Certified? | Yes |
| Total Licensed Bed Capacity (12/31/04): | 69 | Title 19 (Medicaid) Certified? | Yes |
| Number of Residents on 12/31/04: | 50 | Average Daily Census: | 52 |

| Services Provided to Non-Residents | Age, Gender, and Primary Di | agnosis | of Residents (1 | 12/31/04) | Length of Stay (12/31/04) | % | |
|--|-----------------------------|---|-----------------|----------------|---------------------------|---|----------|
| Home Health Care Supp. Home Care-Personal Care | No No | Primary Diagnosis | | Age Groups | · | Less Than 1 Year 1 - 4 Years | 40.0 |
| Supp. Home Care-Household Services | No | Developmental Disabilities | 2.0 | Under 65 | 2.0 | 1 - 4 lears More Than 4 Years | 16.0 |
| Day Services | No | Mental Illness (Org./Psy) | 16.0 | 65 - 74 | 16.0 | | |
| Respite Care | No | Mental Illness (Other) | 4.0 | 75 - 84 | 38.0 | | 100.0 |
| Adult Day Care | No | Alcohol & Other Drug Abuse | 0.0 | 85 - 94 | 36.0 | ********** | ****** |
| Adult Day Health Care | No | Para-, Quadra-, Hemiplegic | 4.0 | 95 & Over | 8.0 | Full-Time Equivaler | ıt |
| Congregate Meals | No | Cancer | 2.0 | | | Nursing Staff per 100 Re | esidents |
| Home Delivered Meals | No | Fractures | 8.0 | | 100.0 | (12/31/04) | |
| Other Meals | No | Cardiovascular | 8.0 | 65 & Over | 98.0 | | |
| Transportation | No | Cerebrovascular | 0.0 | | | RNs | 9.5 |
| Referral Service | No | Diabetes | 10.0 | Gender | % | LPNs | 12.4 |
| Other Services | No | Respiratory | 4.0 | | | Nursing Assistants, | |
| Provide Day Programming for | | Other Medical Conditions | 42.0 | Male | 22.0 | Aides, & Orderlies | 46.3 |
| Mentally Ill | No | | | Female | 78.0 | | |
| Provide Day Programming for | | | 100.0 | | | | |
| Developmentally Disabled | No | | | | 100.0 | | |
| ********** | **** | * | ***** | ****** | ****** | ******* | ****** |

Method of Reimbursement

| | | edicare | | | Medicaid 'itle 19 | | | Other | | | Private Pay | 2 | | amily Care | | İ | Managed Care | Į. | | |
|---------------------|------|---------|---------------------|-----|----------------------|---------------------|-----|-------|---------------------|-----|----------------|---------------------|-----|---------------|---------------------|-----|-----------------|---------------------|-------------------------|-------|
| Level of Care | No. | % | Per Diem (\$) | No. | 90 | Per Diem (\$) | No. | % | Per Diem (\$) | No. | 90 | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | Total Resi- dents | Of |
| Int. Skilled Care | 0 | 0.0 | 0 | 1 | 4.5 | 148 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 1 | 2.0 |
| Skilled Care | 8 | 100.0 | 289 | 21 | 95.5 | 126 | 0 | 0.0 | 0 | 16 | 100.0 | 177 | 0 | 0.0 | 0 | 4 | 100.0 | 173 | 49 | 98.0 |
| Intermediate | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Limited Care | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Personal Care | | | | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Residential Care | | | | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Dev. Disabled | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Traumatic Brain In | j 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Ventilator-Depender | nt O | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Total | 8 | 100.0 | | 22 | 100.0 | | 0 | 0.0 | | 16 | 100.0 | | 0 | 0.0 | | 4 | 100.0 | | 50 | 100.0 |

County: Dane Facility ID: 8540 Page 2 SUNNY HILL HEALTH CARE CENTER

| Admissions, Discharges, and | | Percent Distribution | of Residents' | Condit | ions, Services, an | d Activities as of 12/ | 31/04 |
|--------------------------------|------|----------------------|---------------|--------|--------------------|---|-----------|
| Deaths During Reporting Period | | | | | | | |
| | | | | | % Needing | | Total |
| Percent Admissions from: | | Activities of | % | As | sistance of | % Totally | Number of |
| Private Home/No Home Health | 0.0 | Daily Living (ADL) | Independent | One | Or Two Staff | Dependent | Residents |
| Private Home/With Home Health | 3.1 | Bathing | 0.0 | | 58.0 | 42.0 | 50 |
| Other Nursing Homes | 1.0 | Dressing | 4.0 | | 50.0 | 46.0 | 50 |
| Acute Care Hospitals | 95.9 | Transferring | 10.0 | | 26.0 | 64.0 | 50 |
| Psych. HospMR/DD Facilities | 0.0 | Toilet Use | 8.0 | | 26.0 | 66.0 | 50 |
| Rehabilitation Hospitals | 0.0 | Eating | 62.0 | | 26.0 | 12.0 | 50 |
| Other Locations | 0.0 | ******* | ****** | ***** | ***** | * | ****** |
| Total Number of Admissions | 97 | Continence | | % | Special Treatmen | ts | % |
| Percent Discharges To: | | Indwelling Or Extern | al Catheter | 16.0 | Receiving Resp | iratory Care | 20.0 |
| Private Home/No Home Health | 6.9 | Occ/Freq. Incontinen | t of Bladder | 76.0 | Receiving Trac | heostomy Care | 0.0 |
| Private Home/With Home Health | 47.5 | Occ/Freq. Incontinen | t of Bowel | 60.0 | Receiving Suct | ioning | 0.0 |
| Other Nursing Homes | 8.9 | į | | | Receiving Osto | my Care | 0.0 |
| Acute Care Hospitals | 16.8 | Mobility | | | Receiving Tube | Feeding | 4.0 |
| Psych. HospMR/DD Facilities | 0.0 | Physically Restraine | d | 10.0 | Receiving Mech | anically Altered Diets | 28.0 |
| Rehabilitation Hospitals | 1.0 | į - | | | _ | - | |
| Other Locations | 4.0 | Skin Care | | | Other Resident C | haracteristics | |
| Deaths | 14.9 | With Pressure Sores | | 8.0 | Have Advance D | irectives | 100.0 |
| Total Number of Discharges | | With Rashes | | 6.0 | Medications | | |
| (Including Deaths) | 101 | | | | Receiving Psyc | hoactive Drugs | 68.0 |

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

| ************** | ****** | ***** | ***** | ***** | ***** | ***** | ***** | ***** | ***** |
|--|----------|-----------------------------|-------|-------|--------------|-------|-----------------|-------|--------|
| | This | Ownership: This Proprietary | | | Size: -99 | | ensure: lled | Al | 1 |
| | Facility | Peer | Group | Peer | Group | Peer | Group | Faci | lities |
| | % | % | Ratio | % | Ratio | % | Ratio | % | Ratio |
| Occupancy Rate: Average Daily Census/Licensed Beds | 74.6 | 88.5 | 0.84 | 89.0 | 0.84 | 90.5 | 0.82 | 88.8 | 0.84 |
| Current Residents from In-County | 90.0 | 80.0 | 1.13 | 81.8 | 1.10 | 82.4 | 1.09 | 77.4 | 1.16 |
| Admissions from In-County, Still Residing | 18.6 | 17.8 | 1.04 | 19.0 | 0.97 | 20.0 | 0.93 | 19.4 | 0.96 |
| Admissions/Average Daily Census | 186.5 | 184.7 | 1.01 | 161.4 | 1.16 | 156.2 | 1.19 | 146.5 | 1.27 |
| Discharges/Average Daily Census | 194.2 | 188.6 | 1.03 | 163.4 | 1.19 | 158.4 | 1.23 | 148.0 | 1.31 |
| Discharges To Private Residence/Average Daily Census | 105.8 | 86.2 | 1.23 | 78.6 | 1.34 | 72.4 | 1.46 | 66.9 | 1.58 |
| Residents Receiving Skilled Care | 100 | 95.3 | 1.05 | 95.5 | 1.05 | 94.7 | 1.06 | 89.9 | 1.11 |
| Residents Aged 65 and Older | 98.0 | 92.4 | 1.06 | 93.7 | 1.05 | 91.8 | 1.07 | 87.9 | 1.12 |
| Title 19 (Medicaid) Funded Residents | 44.0 | 62.9 | 0.70 | 60.6 | 0.73 | 62.7 | 0.70 | 66.1 | 0.67 |
| Private Pay Funded Residents | 32.0 | 20.3 | 1.58 | 26.1 | 1.23 | 23.3 | 1.38 | 20.6 | 1.56 |
| Developmentally Disabled Residents | 2.0 | 0.9 | 2.25 | 1.0 | 1.94 | 1.1 | 1.78 | 6.0 | 0.33 |
| Mentally Ill Residents | 20.0 | 31.7 | 0.63 | 34.4 | 0.58 | 37.3 | 0.54 | 33.6 | 0.60 |
| General Medical Service Residents | 42.0 | 21.2 | 1.98 | 22.5 | 1.86 | 20.4 | 2.06 | 21.1 | 1.99 |
| Impaired ADL (Mean) | 65.6 | 48.6 | 1.35 | 48.3 | 1.36 | 48.8 | 1.34 | 49.4 | 1.33 |
| Psychological Problems | 68.0 | 56.4 | 1.21 | 60.5 | 1.12 | 59.4 | 1.14 | 57.7 | 1.18 |
| Nursing Care Required (Mean) | 8.3 | 6.7 | 1.23 | 6.8 | 1.21 | 6.9 | 1.20 | 7.4 | 1.11 |